## Auburn City Recreation Sign-up Form ACR 5u SOCCER

Child's Name:		
Birthdate:	Age:	Boy/Girl:
Parent/Guardian:		,
Home #:	Cell #:	,
Work#:	Alt. Cell # :	
Email:		
Volunteer to:	Coach: Yes/No	Referee: Yes/No

Ages	4-5	yrs	As	Of.	09-01-16)
	Shirt S	ize:			

## ALL PARENTS WILL BE CALLED FOR SCHEDULING

My child has permission to participate in the program indicated on this form. He/She is in good physical condition and has no health problems that would prevent active participation. I agree to abide by all the rules of the program as well as to conduct myself in a manner that would not be considered detrimental by the general norms. I agree to hold harmless Auburn City Recreation in the event of injury sustained by my child. I also grant permission for my child to be photographed and pictures released for publication for purpose of Auburn City Recreations.

Signature of Parent/Guardian: Date:	
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All forms must be accompanied by the appropriate registration fee of \$25.00 per child per sport (**\$30.00 Late Sign-up**), with a maximum fee of \$112.00 per family. Please make checks payable to "Auburn City Rec. or ACR. No refunds will be given. For more information: Contact Nahum Winder auburnrecsoccer@gmail.com